

Dying to Win: Doping in Sport and the Development of Anti-Doping Policy

Barrie Houlihan

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The cover of *Dying to Win* bears a photograph of Tom Simpson, whose death in the Tour de France in 1967 was blamed on drug abuse and alerted the public to the risks. Medical readers will look in vain for information on how many other athletes have 'died to win', to say nothing of the post-mortem findings and the drug levels in their tissues. Barrie Houlihan's book is mainly about process and legislation, and much of the interesting comment on classic sports scandals is buried in the text, to further a sociological point or to illuminate discussion of a class of substances. Good medical information is in fact very scarce—perhaps inevitably in an area so open to rumour and parasitic journalism, and where scientific research presents special difficulties. Historically, much so-called drug-taking in athletes has been accidental (cold remedies or herbal additives), some unwitting (the coach did not tell the athlete what it was) and prescribed medication (which may even be disadvantageous, as with beta blockers in veteran women bowlers). The list of banned drugs may be inappropriate for the sport, and the Olympic list of banned substances is being edited for specific sports.

The title is the only populist aspect of Houlihan's book, but the rather forbidding monographic presentation does include some gems. Take screening, for example. Here we have a generally reluctant population of athletes, with complex collection and storage procedures and laboratory errors. To this add the difficulties of introducing a policing activity into nationalistic sports where there is general acceptance that the foreigners cheat and our chaps are at a disadvantage, a xenophobic sentiment justified retrospectively by disclosures concerning the East German state athletic doping system. I for one, did not realize how basic and comprehensive the problems are. Drug testing is used despite:

- (a) the absence of a generally accepted definition of doping (very few drugs have proven efficacy). Is an athlete who takes a banned but for him unhelpful drug guilty of being anything other than a fool?
- (b) the absence of general international agreement on who should be tested
- (c) a growing dispute as to whether blood or urine should be tested
- (d) dispute as to whether an athlete can be found guilty on the presence of a positive sample alone, without proof of intent to cheat

- (e) disagreement internationally and between sports as to what sanctions (especially the length of a ban) can be used against guilty athletes, their coaches and their doctors.

No wonder some heretics demand 'open sport' with an end to drug testing. Some say that this would give high-technology countries an advantage, but high technology is constantly being applied in other areas of sport—for instance, the USA downhill ski team trained in a wind tunnel to optimize their tuck positions. The argument that it can damage the athlete is correct, but there are few substantiated cases: there was much speculation that 'Flo Jo' Florence Joyner, the superb American sprinter who died suddenly last year, had 'died to win' from taking anabolic steroids, but my information is that she had a lethal seizure from a brain lesion which had nothing to do with her few months of presumed anabolic steroids a decade before. As so often in this area it is very difficult to establish the facts, especially when disappointment at failure may lead athletes to make wild accusations against their more successful rivals.

Court cases have arisen where athletes have appealed against suspension after traces of synthetic anabolic steroids (or even in women athletes large amounts of testosterone) have been found in their urine samples. After tortuous examination of the process they have been found not guilty and subsequently claimed damages. These cases and the threats by athletes of using the law to prevent athletic authorities from imposing long-term bans have been enormously expensive and could easily bankrupt sports associations which are trying to 'clean up' sport. Those who regarded drug testing in sport as a way of getting 'clean athletes' to act as role models for the young have had to watch a steady stream of positive tests and increasing use of anabolic steroids. Paradoxically, the positive tests reinforce the view that you cannot succeed in certain sports *without* drugs. Many sports magazines profit from bombarding athletes with advertisements for ergogenic aids, vitamin and creatine supplements, and doubtful herbal dietary supplements with very variable potency, often containing banned drugs such as ephedrine.

Today's athletes have to face the tremendous pressures of newly professional sport, of obtaining early success to obtain sponsorship and in sports such as rugby and rowing of achieving the size and weight that has become of paramount importance. Leading athletes have a very short time at the top, during which their earning potential is enormous. These pressures may all encourage doping, especially where there is a strong belief that others are already doing it. Houlihan's book, though academic in style, is of considerable general interest.

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